

FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

IN THE UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF ARKANSAS
DIVISION

U. S. DISTRICT COURT
WESTERN DISTRICT ARKANSAS
FILED

APR 10 2006

CHRIS R. JOHNSON, CLERK

BY

DEPUTY CLERK

Antonio Rodriguez
(Enter above the full name of the plaintiff
in this action.)

Prisoner ID No. 90763

V. CASE NO. 06-5062

Washington County
Detention Center

(Enter above the full name of the defendant,
or defendants, in this action.)

I. Previous Lawsuits

- A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes _____

No ✓

- B. If your answer to A is yes, describe each lawsuit in the space below including the exact plaintiff name or alias used. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

1. Parties to this lawsuit

Plaintiffs: _____

Defendants: _____

2. Court (if federal court, name the district; if state, name the county: _____

3. Docket number: _____
4. Name of judge to whom case was assigned: _____
5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?) _____
6. Approximate date of filing lawsuit: _____
7. Approximate date of disposition: _____

II. Place of Present Confinement: Washington Co Detention
Center 1155 W. Clydesdale Dr. Fayetteville
AR 72701

III. There is a written prisoner grievance procedure in the Arkansas Department of Correction and in your county jail. Failure to complete the grievance procedure may affect your case in federal court.

A. Did you present the facts relating to your complaint in the state or county written prisoner grievance procedure?

Yes ✓ No _____

B. If your answer is YES, Attach copies of the most recent written grievance(s)/response(s) relating to your claims showing completion of the grievance procedure. FAILURE TO ATTACH THE REQUIRED COPIES MAY RESULT IN THE DISMISSAL OF YOUR COMPLAINT.

C. If your answer is NO, explain why not: _____

IV. Parties

(In item A below, place your name in the first blank and place your present address in the second blank.)

A. Name of plaintiff: Antonio Rodriguez

Address: 1155 W. Clydesdale Dr.

Fayetteville, AR 72701
F-block

(In Item B below, place the full name of the defendant in the first blank, his official position in the second blank, his place of employment in the third blank, and his address in the fourth blank.)

B. Defendant: Tim Helder
Position: Sheriff
Place of Employment: Washington County Sheriff Office
Address: 1155 W. Clydesdale Dr. (Fayetteville, AR 72701)

Defendant: _____

Position: _____

Place of Employment: _____

Address: _____

Defendant: _____

Position: _____

Place of Employment: _____

Address: _____

Defendant: _____

Position: _____

Place of Employment: _____

Address: _____

Defendant: _____

Position: _____

Place of Employment: _____

Address: _____

V. Statement of Claim

State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

I am being discriminated against by the Washington Co Detention Center

I have went through the proper procedure concerning my problem and have not been properly responded to by the channels of staff here at the Washington Co Detention Center

VI. Relief

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

I would like Fair justice and to be treated with dignity and respect like other individuals I would also like to know I never got response

I declare (or certify, verify, or state) under penalty of perjury (18 U.S.C. § 1621) that the foregoing is true and correct.

Executed this 24 day of March, 2006.

Rubio Rodriguez
Printed Name of Plaintiff

[Signature]
Signature of Plaintiff



Washington County Detention Center

CHECK ONE: ☐ GRIEVANCE ☐ REQUEST ☒ MEDICAL

DATE 3-21-06

CELL BLOCK F

DETAINEE'S FULL NAME: Antonio Rodriguez DOB: 8-14-06
 WRITTEN EXPLANATION (LIMIT TO ONE SUBJECT):

Hey the Doctor gave me some medication but they are not working I am hurting bad I am thinking it may be a tumor and just because I am an illegal doesn't mean I don't have rights if you can't help me with my problem send me back to my country I am Hurting and I think I need surgery it feels and looks like a tumor I need medical attention quick please I need a respond or get immigration over here so I can get help.

RECEIVED BY: Stacey #533 DATE 3-21-06 TIME 2:40 p.m.
 FORWARDED TO: Lavosky 490

RESPONSE:

Sir You have seen Dr. Howard regarding this. As he told you we can give you Ibuprofen but a monitor this cyst but we are not going to do anything with this now. It is not a life threatening issue.

RESPONSE BY: L. Mon. RN

DATE 3/21/06 TIME ...



Washington County Detention Center

CHECK ONE: ☐ GRIEVANCE ☒ REQUEST ☐ MEDICAL

DATE 2-8-06 CELL BLOCK B-F
 DETAINEE'S FULL NAME: ANTONIO RODRIGUEZ DOB: 8-14-67
 WRITTEN EXPLANATION (LIMIT TO ONE SUBJECT):

YESTERDAY I TURNED IN A REQUEST TO BE
 FWD. TO A SGT. THE GUARD SMD HE FWD IT
 YET I STILL HAVEN'T GOTTEN A RESPONSE I REALLY
 NEED TO KNOW SOMETHING PLEASE.

Thank you.

RECEIVED BY: WILLIAMS 524 DATE 2/8/06 TIME _____
 FORWARDED TO: _____
 RESPONSE: _____

The sergeants receive requests daily
 from over 400 detainees - it sometimes
 takes a few days to get an answer
 Please be patient.

RESPONSE BY: Opt [Signature] ⁴⁴³ DATE 2/8/06 TIME _____

Antonio Rodriguez
1155 W Clyde Dale Dr
Foguthville AR 72701

POSTAGE DUE 24

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WCSO MAIL

United States District Court
P.O. Box. 15-25
Fort Smith AR 72902

